EFFECT OF PHYSICAL ACTIVITIES ON SELECTED PSYCHOLOGICAL AND SOCIOLOGICAL PARAMETERS AMONG ORPHANS OF CHAMBAL REGION

A

SYNOPSIS

By

Himanshi Verma

Doctorate of Philosophy

Roll No. 478

Submitted for the requirement of Doctorate of Philosophy in

Department of Sports Psychology

Lakshmibai National Institute of Physical Education, Gwalior (M.P)

May, 2023

TABLE OF CONTENTS

CHAPTER-I

a) Brief introduction of topic
b) Statement of the problem
c) Objectives of study
d) Delimitations
e) Limitations
f) Hypothesis
g) Definition and explanation of terms
h) Significance of the study

CHAPTER- II

a) Review of related literature

CHAPTER- III

a) Selection of subjects
b) Criterion measures
c) Administration of tests & collection of data
d) Statistical technique employed in study

REFERENCES

DEPARTMENT OF SPORTS PSYCHOLOGY

CERTIFICATE

I hereby declare that the short synopsis "EFFECT OF PHYSICAL ACTIVITIES ON SELECTED PSYCHOLOGICAL AND SOCIOLOGICAL PARAMETER AMONG ORPHANS OF CHAMBAL REGION" is being submitted in partial fulfilment of the requirements for the degree of Doctor of Philosophy in Physical Education under the Department of Sports Psychology of Lakshmibai National Institute of Physical Education, Gwalior, during the academic year 2022–2023.

It is a bona fide record of original work carried out under the supervision of Dr. Bharat Verma, Head, Department of Sports Psychology, Associate Professor, LNIPE, Gwalior and has not been submitted, in full or in part, to any other university or institute for a degree or diploma. Further, it is certified that the short synopsis is plagiarism-free and the proof has been submitted.

13.05.25

(Ms. Himanshi Verma)
PH2016-07

13/05/25

(Dr . Bharat Verma)
Head, Department of Sports Psychology
Associate Professor
LNIPE, Gwalior (MP)

13/05/25

(Chairman, DRC)

CHAPTER-I

INTRODUCTION

Introduction of Education and Physical education

Mahatma Gandhi said "by education I mean an all-round drawing out of the best in child and man, body, mind and spirit". Swami Vivekananda gave the most practical definition of education and it is a new outlook on education. He said "we want that education by which character is formed, strength of mind is increased, the intellect expounded and by which one can stand on his feet". According to Aristotle "Education is a creation of sound mind in sound body. It develops man's faculty especially in his mind so that he may be able to enjoy the contemplation of supreme truth, goodness and beauty of which perfect happiness especially consists". In the modern world, education is looked on as preparing the individuals for a meaningful self-directed existence. It is viewed as the primary focus of education. The role of physical education comes up in this juncture.

Physical education as a branch of knowledge lays emphasis on building a physically, emotionally, mentally and socially fit individual. A heavy responsibility rests on the shoulders of those who spend a large share of their time with the youths of today. If experiences are provided that are satisfying, successful and directed towards enriching the student's life, the purpose of education will be accomplished. Charles Butcher (1967) the great American physical educationalist states: "Physical education is an integral part of the total education process in the field of endeavor, which has as its aim the development of physically, mentally, emotionally and socially fit citizens through the medium of physical activities which has been selected with a view to realizing these outcomes".

Physical education is the education that is based on common core of learning experience planned on a sequential arrangement appropriate to the individual's all stages of physical, social, emotional, intellectual and psychomotor development. Education is brought about as the individual's interest with the surrounding physical environment.

According to Budely Sergent, (1997) "physical education should aim to improve the m ass students and to give them as much as health, struggle and stamina as possible to enable them to perform the duties that adds them a grater their schools and colleges. Participation of the students in physical education activities under the guidance of well-qualified teachers contribute significantly to the total health through the development of physical, mental social and emotional aspect. Physical education programs also provide experience in imbibing the spirit of democratic citizenship as well as an opportunity for carrying out leisure time pursuits.

Physical activity refers to any bodily movement produced by skeletal muscles that results in energy expenditure above resting levels. There are multiple types of physical activities as differentiated by predominant physiologic effect. Physical activities can be measured by subjective and/or objective instruments. Physical activities have multiple health benefits and should be performed throughout the life span. The lack of such activity harms well-being and growth.Physical activity (PA) can be defined as any bodily movement produced by skeletal muscles that results in energy expenditure above resting levels. Regular PA and exercise are associated with numerous physical and mental health benefits. Since PA is a multidimensional behavior that does not exist in a vacuum, its definition should be situated in several related constructs such as sedentary behavior, energy expenditure, and physical fitness. PA, therefore, may be operationally defined as "the behavior that involves human movement, resulting in physiological attributes including increased energy expenditure and improved physical fitness" (Pettee Gabriel, Morrow, & Woolsey, 2012, p. S15).

Psychology, scientific discipline that studies mental states and processes and behaviour in humans and other animals. The discipline of psychology is broadly divisible into two parts: a large profession of practitioners and a smaller but growing science of mind, brain, and social behaviour. The two have distinctive goals, training, and practices, but some psychologists integrate the two.**Sports psychology** is the study of psychological factors that influence athletic performance and how participation in sports and exercise can affect the psychological and physical well-being of athletes.

An **Orphan** is a child whose parents have died. Orphans are children who have lost one or both parents. They may be cared for by extended family members, foster parents, or in an orphanage

India has 29.6 million orphaned and abandoned children (more than the population of Sri Lanka! In 2017, of these 30 million children, there were only 370,000 children in over 9500 child care institution. In an orphanage or CCI the child has access to some food, limited education but only till age 14. When the child turns 18, she has to leave the home, but is entitled to "aftercare"—support for independent living and community integration, as laid out in the Juvenile Justice Act.

Orphans are at risk of experiencing a range of psychological issues due to the trauma of losing one or both parents. These issues can include depression, anxiety, post-traumatic stress disorder (PTSD), and attachment disorders. Psychologists can play an important role in helping orphans to overcome these challenges. They may work with children individually or in groups to help them develop coping strategies and build resilience. Psychologists may also work with caregivers to help them provide a supportive environment for children who have experienced trauma.

Orphans can face a range of sociological problems due to their lack of parental support. These problems can include poverty, social isolation, and limited access to education and healthcare.

Society can play an important role in helping orphans to overcome the challenges they face. This can include providing financial support to orphanages and other organizations that work with children who have lost one or both parents. Society can also help by providing educational and employment opportunities for orphans as they grow up. NGOs are playing a leading role in taking care of orphan and abandoned children. Since the government of India funds only 9% of child care Institutions, it is our duty to support all NGO orphanages with donations and advocacy.To address the fall in donations for orphanages and avoid shortages, Child Protection Scheme (CPS) funding by the government should be extended to all registered CCIs, at least until the current COVID-19 pandemic situation stabilizes. the process to avail funding under ICPS is cumbersome and is released as reimbursed only. Often CCIs get reimbursed for a far lower amount given low budgetary allocations towards child protection services.

So this study is an attempt that problems faced by orphans at least can be reduced and they can made aware about their strengths and abilities which can help them to move ahead in life and achieve their goals and will also make them away from committing any type of crime and the physical activities will also help them channelizing their energies in to the positive reactions ahead.

STATEMENT OF THE PROBLEM

The present study focuses on investigating the effect of physical activities as a progressive tool on selected psychological and sociological parameters among orphans.

OBJECTIVES OF THE STUDY

The objectives of the study are:

1. To assess the level of psychological parameters among orphans.
   Emotional Intelligence
   Anxiety
2. To assess the level of sociological parameters among orphans.
   Social competence
   Social Adjustment
3. To compare the level of psychological parameter (emotional intelligence) among control group and experimental group of orphans.
4. To compare the level of psychological parameter (anxiety)Emotional Intelligence among control group and experimental group of orphans.
5. To compare the level of sociological (social competence) among control group and experimental group oforphans.
6. To compare the level of sociological parameters (social adjustment) among control group and experimental group of orphans.

DELIMITATIONS

- The study will be delimited to male orphans of Gwalior city.
- The study will be delimited to 100 male orphans aging ranged between 13 to 17 years.
- The study will be delimited to the various physical activities which can be

conducted at the orphanage.

- ❖ The study will be further delimited to the undermentioned selected psychological parameters which will be assessed with the help of **Questionnaire:**
  - Emotional Intelligence.
  - Anxiety
- ❖ The study will be further delimited to the undermentioned selected sociological parameters which will be assessed with the help of **Questionnaire:**
  - Social Competence
  - Social Adjustment

LIMITATIONS

- ➢ The type of living conditions, diet, rest and the daily routine was considered as limitation of the study.
- ➢ Questionnaires have their own limitations in testing the subjects.

HYPOTHESES

On the basis of reviews of related literature and discussion with experts, it is hypothesized that there will be no significant difference in the level of selected psychological and sociological parameters among orphans.

DEFINITION AND EXPLANATION OF TERMS

Physical activity-refers to any bodily movement produced by skeletal muscles that results in energy expenditure above resting levels.

Orphans-An orphan is a child whose parents have died. Orphans are children who have lost one or both parents. They may be cared for by extended family members, foster parents, or in an orphanage

Emotional Intelligence-refers to the ability to identify and manage one's own emotions, as well as the emotions of others. It is the ability to use, understand and manage one's own emotions in a positive way, and to manage stress, communicate effectively, de-escalate issues, problem solve and empathize with other people.

Anxiety- is a feeling of unease, such as worry or fear, that can be mild or severe.

Social competence -Social competence refers to the social, emotional, and cognitive skills and behaviors that children need for successful social adaptation. It is the foundation upon which expectations for future interaction with others are built and perceptions of an individual's own behavior are developed. Social competence frequently encompasses social skills, social communication, and interpersonal communication.

Social Adjustment- Social adjustment is the achievement of balance in social relationships usually aided by the appropriate application of social skills. It refers to person's adjusted behavior towards society to maintain good social life. Social adjustment requires the development of social qualities and virtues in an individual.

SIGNIFICANCE OF STUDY

The study may contribute in the following ways: -

- The results of this study will be helpful to prepare an effective progressive physical activity module for the orphans.
- The study will be helpful for curative and developmental programme through physical activities among orphans.
- The result of the study also highlights that physical activities are effective for psychological and sociological parameters.
- The result of the study may highlight effect of different sports activities on psychological and sociological parameters with respect to time.
- The findings of the study will add new knowledge in the field of sports psychology and physical education.

CHAPTER-2

REVIEWS OF RELATED LITERATURE

Malla, Tabasum & Rather, Ifhsana (2019) conducted „A comparative study of half-orphan and double-orphan adolescents to explore the psychological wellbeing in orphanage of District Srinagar, Kashmir". 115 adolescents were selected randomly. Using „t" test, it was found that there is significant difference between half orphans and double-orphans in relation with positive relation with others and self acceptance dimensions of PWD, while there is significant difference in autonomy, environmental mastery, personal growth, purpose of life.

Bhat Ahmad Nasir (2018) The central theme of the current study was to understand the level of self-efficacy, resilience, optimism and the use of coping strategies among orphans victimized in the ongoing conflict of Kashmir, which pertains to the fact that these psychological constructs have a positive effect on the orphans' life, despite being exposed to conflict and traumatic situations which compromise their ability to function effectively. A different psychologist has pointed out that the availability of certain protective factors can mitigate the effect of being exposed to situations where the loss is likely. The main objective of the study was to find out how were the mindsets of those orphans who coped better with traumatic circumstances different from those who could not cope as well. This investigation would yield a better understanding of the different roles the two kinds of orphans played that differentiated them, while they struggled to achieve their desired outcomes. For this purpose, the Kashmir valley's four districts were randomly selected, and the sample was taken from all orphanages in these districts, which were then subjected to purposive sampling to achieve the total sample size (N-300) comprising males and females using the Roger Saps fords method. The tools used included a socio-demographic profile sheet (SDPS) pertaining to Gender, Age, Educational level, Family Type, and Birth Order and in addition to this the information related to the nature of orphan hood. The General Self-Efficacy Scale (GSE) scale was used to measure a general sense of perceived self-efficacy to predict coping with daily hassles and all kinds of stressful life events and how these circumstances are being managed by one way or other was measured by The Resilience Scale, optimism was assessed by the Life-Oriented-Test- Revised (LOT-R), and finally reactions to stress were measured using Brief Coping Scale. The observed

data obtained from the participants was analyzed by using SPSS-21 Software through different statistical techniques for example descriptive (frequency distribution, Mean, SD) and inferential statistics (TWO-WAY-ANOVA with main effect and interaction effect) besides the mediating role of self-efficacy and optimism in explaining the relationship between predictor and outcome in identifying and test the formulated hypotheses. Results obtained with the help of Analysis of Variance showed a significant Main effect of Group (orphan and non-orphan) and Main effect of Age (13-15 and 16-18 years) on Self-efficacy, resilience along with dimensions, optimism and coping strategies. Mean score indicated that orphans achieved a higher score with respect to all the variables as compared to their non-orphan counterparts. A significant Interaction effect was found between Group and Age on Resilience which indicated that orphans of 13-15 years of age had a higher level of resilience when compared with orphans of 16-18 years of age. Further the indirect effect of self-efficacy and optimism Le. mediating variables have transmitted some of the effects of the independent variable (coping strategies). Thus, the research findings obtained from the current study revealed that orphan adolescents attempted to overcome the life challenges and hold positive life expectations towards the future while living in the orphanage home, away from their family members. They perhaps had more self-efficacy along with resilience and personal competence besides acceptance of self and life which made them so psychologically strong that they scored high on both emotional and problem-focused coping strategies. This suggests that the expected non-dependency induced an inbuilt character of autonomy among them. The researcher acknowledges the limitations of the study by observing the findings which highlight a need to explore other factors which can have an immensely positive impact on the well-being of orphans. The study was purely based on positive psychological self-report constructs and the sample size was confined to conflict affected orphan children who were enrolled in school currently regular residing more than two years in an orphanage due to which a cautious generalization may be made.

Kaur, Ravneet &Vinnakota, A. (2018) conducted „A descriptive study on behavioral and emotional problems in orphans and other vulnerable children staying in institutional homes. The sample consisted 292 orphans of Vishakhapatnam city. In result, 49 out of 292 children and adolescents were found to have behavioral and emotional problems. Orphan institutional children are more vulnerable to behavioral

and adjustment problems.

Maqbool, Aasia (2018) conducted the study on „Academic achievement of orphan and non-orphan adolescents -a comparative study". 100 orphan and nonorphan students were selected randomly. There is a significant difference in mean between orphan and non-orphan adolescent.

Shiferaw, Gemechu & Bacha, Lemi (2018) conducted a study on "Prevalence of depression and its associated factors among orphan children in orphanages in Ilu Abba Bor zone, South West Ethiopia". They found that prevalence of depression was high among orphans and this finding suggests that screening for depression and mental health care should be integrated into routine health.

Upreti, Rashmi & Sharma, Seema (2018) conducted „A study of self-esteem and its relationship with the adjustment of orphan age-reared, single parent family reared and intact family reared adolescents". The sample consisted 300 from the four selected cities of Punjab. 100 students were selected randomly from orphans and 200 students from government schools. The study findings concluded that as no such significant difference was found in the self-esteem of orphanages, single parent and intact families.

Dutt et.al (2016), "A comparative study on Depression & Suicidal Ideation among orphans." results revealed that female orphans had more suicide attempts than male orphans, supporting other findings that female gender is associated with suicide attempts. Research also indicates that women are nearly twice as likely as men to report moderate difficulty with suicidal feelings or behaviors.

Watson et.al (2015), "Therapeutic approaches in the management of orphan's psychological problems." They reported that CBT, PMRT, Self-Management and Life Skills appears to be the equipped form of psychotherapy to manage the diagnostic and treatment issues that exit in orphan population with depression and suicidal ideation. These can be particularly useful for orphans who are dealing with depressive conditions, recurrent thoughts of suicide and limited levels of social support.

Atwine, B., Cantor-Graae, E., &Bajunirwe, F. (2005). "Psychological distress among AIDS orphans in rural Uganda" The objective of this study was to investigate the psychosocial consequences of AIDS orphan in a rural district in Uganda and to identify potential areas for future interventions. The study population consisted of 123 orphan children aged 11-15 years whose either parent or both parents died due to AIDS and 110 children of similar age and gender living in intact households in the same neighbourhood. Symptoms of psychological distress were assessed using the Beck Youth Inventories of Emotional and Social Impairment (BYI). The standardized interview also included questions concerning current and past living conditions. The result reveal that orphans had greater risk for higher levels of anxiety, depression, and anger compared to non- orphans. Furthermore, orphans had significantly higher scores than non-orphans on individual items in the Beck Youth Depression Inventory that are regarded as particularly "sensitive" to the possible presence of a depressive disorder, i.e. vegetative symptoms, feelings of hopelessness, and suicidal ideation. High levels of psychological distress found in AIDS orphans suggest that material support alone is not sufficient for these children psychological support also needs to be given to them.

Garhok (1973) investigated the personality traits of orphans. The study sample included 200 subjects, including 100 orphans from orphanages and future homes and 100 non-orphans in the main cities of Uttar Pradesh, aged 13 to 15 years. Personal preference questionnaire, personal data calendar and the progressive matrices of Raven as well as an attitude scale. The main conclusions were as follows: (1) The composition of the orphanage as a group was different from that of non-orphans. Orphans showed psycho-neurotic tendencies in the form of more negative emotions, anxiety, inferiority, depression, helplessness, insecurity, embarrassment, reserve, passivity, anxiety and emotional instability. (2) The orphans seemed to gain a sense of hostility towards authority and society. (3) Orphans are less positive towards their elderly and more negative towards society than non-orphans. (4) For orphans, adaptation to home, social and health was insufficient. (5) The personality of the orphans was dominated by negative emotions. (6) Orphans and girls were less positive about life, humanity and religion than non-orphans. Review of Related Literature 76 (7) Less positive attitude towards religion, less cheerful, less cooperative and less social compared to non-orphans.

James, Sengendo, & Janet, Nambi. (1997). "The psychological effect of orphanhood: a study of orphans in Rakai district" This aim of this paper was to examine the psychological effect of orphanhood in a case study of 193 children in Rakai district of Uganda. The mixed methodology used to collect the data from the sample. The concept of the locus of control is used to show the relationship between the environment and individuals' assessment of their ability to deal with it and to adjust behaviour. Most orphans experienced risk powerful cumulative and often negative effects as a result of parents' death, thus becoming vulnerable and predisposed to physical and psychological risks. The result found that Orphans had a higher average score of depression than the non-orphans. Young children (10-14 years) living with their widowed fathers are significantly more depressed than older children (15-19 years) living with widowed fathers. Regarding the adjustment score orphans scored higher than non-orphans, which seems to indicate that they were better adjusted than non-orphans. The authors suggested that teachers need to be retrained in diagnosing psycho-social problems and given skills to deal with them. Short term courses should be organized for guardians and community development workers in problem identification and counselling.

CHAPTER- III

PROCEDURE AND RESERCH METHODOLOGY

In this chapter, the selection of subjects, selection of variables, criterion measures, administration of test, collection of data and statistical technique for analysis of data has been described.

SELECTION OF SUBJECTS

To attain the purpose of the study, 50-100 male orphans of Gwalior city will be selected as subjects of the study. The age of the subjects will be ranged from 13-17 years.

SELECTION OF VARIABLES

The psychological parameters selected for the study are, as follow:

a. Emotional Intelligence
b. Anxiety

The sociological parameters selected for the study are, as follow:

a. Social Competence
b. Social Adjustment

CRITERION MEASURES

The psychological variables will be assessed by using QUESTIONNAIRE

Emotional Intelligence- Will be assessed with the help of - A. K. Singh and Shruti Narain Emotional Intelligence Scale (This scale consists 31 items divided into four area—I. Understanding Emotions, II. Understanding Motivation, III. Empathy, IV. Handling Relations. It was administered on 12 years and above age.

Anxiety- Will be assessed with the help of Subhash Sarkar and Goutam Das Anxiety Scale.

(This scale consists 48 items divided into Six Dimensions–I. Worry, II. General Anxiety, III. Low Self Confidence, IV. Over Thinking, V. Panic Attacks, VI. Depression. It was administered on 15-25 years boys & girls.)

The sociological parameters will also be assessed by using a QUESTIONNAIRE:

Social Competence- V. P. Sharma, Prabha Shukla and Kiran Shukla. Social Competence Scale (This scale consists 50 items. This scale is meant for school going children from 10 to 15 years class VI to IX. On the basis of factor analysis, it measures social competence through eighteen factors—I. Sensivity, II. Maturity, III. Skills, IV. Relations, V. Commitment, VI. Appreciation Ability, VII. Socio-Emotional Integrity, VIII. Involvement, IX. Respectability, X. Leadership, XI. Cooperation & Compliance, XII. Acceptability, XIII. Tolerance, XIV. Competition, XV. Authority, XVI. Adult Resource Exploitability, XVII. Participation, XVIII. Pro-social Attitude.)

Social Adjustment- Ashutosh Kumar. Social Adjustment Scale
(This scale consists 16 items. It was administered on age group 14 to 16+.)

ADMINISTRATION OF TEST

- The participants of the experimental group will be given the offline training of physical activities according to the schedule undermentioned:
- Demonstration of all the physical activities will be explained to the participants.
- Sessions will be conducted 5 days a week for 16 weeks.

TRAINING SCHEDULE

DAY	AREA TO BE FOCUSED	WORKOUT
MONDAY	General physical fitness	Warm up Jogging Jumping exercises General exercises Specific exercises Stretching exercises Cool down exercises
TUESDAY	Strength exercises, agility, flexibility, endurance balance, power, speed, reaction time	**Strength exercises**-Push - ups with knees on the floor, Leg raises, crab-walk **Agility**-coordination exercises, side shuffle **Flexibility**-butterfly stretch, quad stretch, toe-touch **Speed**-short sprints, shuttle run, **Balance**-obstacle course, **Power**-push-up, plank, burpee **Reaction Time** - Drop and catch, ball tossing etc....
WEDNESDAY	Aerobics, Zumba	Physical rhythmic exercises
THURSDAY	Yoga, meditation, yoga Nidra, chocolate meditation, mindfulness breathing, progressive relaxation techniques, quick relaxative techniques etc.	Sukshma Vyayama Surya namaskar Asanas like vriksasana, balasana, adhomukhasvanasana, bhujangasana, relaxation asanas etc
FRIDAY	Recreation and other games like volleyball, football, cricket, kho-kho, kabaddi etc.	Recreational games like fire in the mountain, tug of war,10 passes, capture the flag etc....

TRAINING PROTOCOL

WEEKS	NO OF EXERCISES	NUMBER OF SETS	NUMBER OF REPETITIONS	DURATION
1-4TH	3-4	2-3	6-8	25-35 minutes
5-8TH	4-5	2-3	6-8	25-40 minutes
9-12TH	5-6	3-4	8-10	40-45 minutes
13-16TH	6-8	3-4	8-10	60 minutes

- The other fitness variables will be replaced week by week i.e., agility, flexibility, endurance, balance, power, speed, reaction time etc.
- The participants will also provide with the training psychological techniques like imagery, self-talk, goal-setting etc.
- The other games will also be replaced week by week like kho-kho, kabaddi, volleyball, cricket, football etc.
- Duration and intensity will be increased as per the adaptation seen in the children.
- All workout sessions will be followed by proper stretching, cool down and relaxation exercises.

COLLECTION OF DATA

The subjects will be assessed into two groups:
Experimental Group (G1)-50subjects
Control Group (G2) -50 subjects

The experimental group will be provided with the training of physical activities for 16 weeks and the control group will not be given any training. Pretest of both the groups will be taken through questionnaire's and then a Post-test will be taken after the training.

STATISTICAL TECHNIQUE

To find out the significant difference of the means of pre-test and post-test of experimental and control groups, ONE-WAY (ANOVA) test will be used. The level of significance will be set at 0.05.

REFRENCES

1. Golfer, and et.ai., Contemporary Physical Education, Hamilton: WCB Publishers, 1986.
2. Don Cach Seaton, Etal. Physical Education Hand Book, 7^^ Edition, New Jersey: Englewood Cliffs Publications, 1970.
3. 2018 Physical Activity Guidelines Advisory Committee. (2018). 2018 Physical Activity Guidelines Advisory Committee scientific report. Washington, DC: US Department of Health and Human Services.
4. Mischel, W. (2023, April 28). *psychology*. *Encyclopedai Britannica*. https://www.britannica.com/science/psychology
5. Dey, P., & Beena Daliya, R. (2019). The Effect of Resilience on the Psychological Well Being of Orphan and Non-Orphan Adolescents. *Indian Journal of Mental Health*, *6*(3), 253.
6. Cluver, L., Gardner, F., & Operario, D. (2007). Psychological distress amongst AIDS-orphaned children in urban South Africa. *Journal of child psychology and psychiatry*, *48*(8), 755-763.
7. Atwine, B., Cantor-Graae, E., & Bajunirwe, F. (2005). Psychological distress among AIDS orphans in rural Uganda. *Social science & medicine*, *61*(3), 555-564.
8. Salifu Yendork, J., & Somhlaba, N. Z. (2016). The role of demographic and positive psychological factors on quality of life in Ghanaian orphans placed in orphanages: An exploratory study. *Child Indicators Research*, *9*, 429-443.
9. Kaler, S. R., & Freeman, B. J. (1994). Analysis of environmental deprivation: Cognitive and social development in Romanian orphans. *Journal of Child Psychology and Psychiatry*, *35*(4), 769-781.
10. Puffer, E. S., Drabkin, A. S., Stashko, A. L., Broverman, S. A., Ogwang-Odhiambo, R. A., & Sikkema, K. J. (2012). Orphan status, HIV risk behavior, and mental health among adolescents in rural Kenya. *Journal of pediatric psychology*, *37*(8), 868-878.
11. Kolayiş, H., Sarı, İ., Soyer, F., &Gürhan, L. (2011). Effect of the physical activities on orphans' anxiety and self-esteem. *Anxiety*, *2*(0.019).

12. Sahad, S. M., Mohamad, Z., & Shukri, M. (2018). Differences of mental health among orphan and non-orphan adolescents. *International Journal of Academic Research in Psychology*, *5*(1), 556-65.
13. Abdussalam, M. (2017). Social Competence and Quality of Life: A Comparative Study among Orphans and Non-Orphans. *Phonix-Int J Psychol Soc Sc*, *1*(3).
14. Skeels, H. M., Updegraff, R., Wellman, B. L., & Williams, H. M. (1938). A study of environmental stimulation: An orphanage preschool project.
15. Rajalekshmi, J. (2017). Social adjustment problems of adolescent orphans in the classroom. *Voice of Research, 6 (1)*, 14-15.